

State of West Virginia
Purchasing Division
AGREEMENT

Purchase Order # TOR4881WVFIMS Account # 3067-2015-7511-61800

TEAM Vendor # _____

WVFIMS Vendor # 000000166506 Oasis #

I, Old White Charities, Inc., 300 W Main Street, White Sulphur Springs, WV, agree to perform the following services
for WV Division of Tourism at 90 MacCorkle Avenue, SW, So Chas, WV
(Agency) (Name and address) (Location)

Presenting Partner Sponsorship of The Greenbrier Classic Golf Tournament
(Detailed description of services to be performed)

Date(s) of Service: from June 1, 2015 to October 15, 2015

The rate of pay shall be \$500,000.00 per N/A not to exceed
\$ N/A for the entire term of the contract.

NOTE: Any anticipated travel must be incorporated into the vendor's fee. No travel will be reimbursed by the State and is the sole responsibility of the vendor. The following certification must be completed and signed if the vendor is a full-time employee of the State of West Virginia.

Please check the appropriate box below:

- ☒ I am not currently a full-time employee of the State of West Virginia;
☐ I am currently a full-time employee of the State of West Virginia (complete certification below).

It is hereby certified that the services to be performed under this agreement will not interfere with or detract from the full-time duties of the employee and the amount of annual compensation received by _____ (above named vendor) from the State of West Virginia for full-time employment during the current fiscal year will be \$ _____. The vendor serves as _____ with the title of _____, certified by _____
(Position) (Supervisor's Signature)

GENERAL TERMS AND CONDITIONS: The General Terms and Conditions for Agency Delegated Master Terms and Conditions located on the Purchasing Division's website at <http://www.state.wv.us/admin/purchase/TCA.pdf>, ("Terms and Conditions") are hereby made a part of this agreement and are specifically incorporated herein by reference. By signing this agreement, Vendor certifies that it has reviewed the Terms and Conditions, fully understands them, and agrees to be bound by their provisions.

APPROVED BY:

Agency West Virginia Division of Tourism

Angela L. Hodges
(Authorized Signature of Agency)
Angela L. Hodges
(Title)
4/8/15
(Date)

Vendor

Old White Charities, Inc.
by [Signature]
27-1567963
(Vendor's Signature)
4-9-2015
(Social Security or EIN) (Date)

Paid Checks

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Bank Account : 0001 Document Code :
Check / EFT Number : Doc Dept : 0304
Check / EFT Amount : Document ID : AUTO1600030190
Record Date : Cleared Date :
Last Action Date : Status :

<u>Bank Account</u>	<u>Check / EFT Number</u>	<u>Check / EFT Amount</u>	<u>Document ID</u>	<u>Status</u>	<u>Cleared Date</u>	<u>Cancellation Reason</u>	<u>Comments</u>	<u>Trace Number</u>
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